

# HellerEhrman

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## Facsimile Transmittal

**To:** Examiner M. Dibrino, USPTO  
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**From:** John P. Isacson  
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Please return to Pam Hall

**No. of Pages:** 4 (including cover)  
**Date:** January 23, 2004

4870/38163-0034

**Message:** RE: 09/529,121 (Schlom et al.)  
Attorney Docket No. 38163-0034

Dear Examiner Dibrino:

Attached please find a Request for Extension of Time to cover the additional two months of time. The filing fees are to be taken from deposit account no. 08-1641. Thank you.

Attached:

- 1) Fee Transmittal
- 2) Petition for Extension of Time
- 3) Certificate of Transmission under 37 CFR 1.8

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PTO/SB/22 (10-01)  
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 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

 Docket Number (Optional)  
 38163-0034

In re Application of Jeffrey SCHLOM et al.

Application Number 09/529,121

Filed June 13, 2000

 For AGONIST AND ANTAGONIST PEPTIDES OF  
 CARCINOEMBRYONIC ANTIGEN (CEA)

**RECEIVED**  
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 Group Art Unit  
 1644

 Examiner  
 M. Dibrino

JAN 26 2004

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_  
☐ Two months (37 CFR 1.17(a)(2)) \$ \_\_\_\_\_  
☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_  
☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_  
☒ Five months (37 CFR 1.17(a)(5)) \$ 1,040

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-1641.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

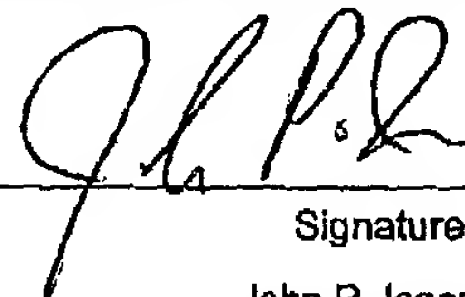
☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_.

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January 23, 2004

Date



Signature

John P. Isacson


Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2003 <i>Effective 01/01/2003. Patent fees are subject to annual revision.</i>						Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						Application Number	09/529,121
						Filing Date	June 13, 2000
						First Named Inventor	Jeffrey SCHLOM et al.
						Examiner Name	M. Dibrino
						Art Unit	1644
TOTAL AMOUNT OF PAYMENT (\$1,040.00)						Attorney Docket No.	38163-0034
METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None						3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 08-1641 (Docket No. 38163-0034) Deposit Account Name: Heller Ehrman White & McAuliffe LLP							
The Commissioner is authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments							
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application							
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.							
FEE CALCULATION							
1. BASIC FILING FEE							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1001	750	2001	375	Utility filing fee			
1002	330	2002	165	Design filing fee			
1003	520	2003	260	Plant filing fee			
1004	750	2004	375	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1)							
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Total Claims: 20** = <input type="text"/> x <input type="text"/> = <input type="text"/>							
Independent Claims: 3** = <input type="text"/> x <input type="text"/> = <input type="text"/>							
Multiple Dependent: <input type="text"/> = <input type="text"/>							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1202	18	2202	9	Claims in excess of 20			
1201	84	2201	42	Independent claims in excess of 3			
1203	280	2203	140	Multiple dependent claim, if not paid			
1204	84	2204	42	**Reissue independent claims over original patent			
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)							
**or number previously paid, if greater; For Reissues, see above							
SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)	John P. Isaacson					Registration No. (Attorney/Agent)	33,715
Signature						Date	January 23, 2004
						Telephone	(202) 912-2000
						Customer No. 26633	

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 7.

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### Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile  
transmitted to the Patent and Trademark Office

on January 23, 2004.

Date



Signature

Pamela Hall

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this  
certificate must identify each submitted paper.

Fee Transmittal (1-page)  
Petition for Extension of Time (1-page)